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25944 7590 11/27/2006

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FEB 23 2007

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/809,463	03/26/2004	Atsuhisa Atsuhisa Nakashima	119260	7632

TITLE OF INVENTION: IMAGE FORMATION APPARATUS AND RECOVERY EJECTION METHOD OF PRINT HEAD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/27/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HSIEH, SHIH WEN	2861	347-023000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	1 Oliff & Berridge, PLC 2 00000137 10809463 3 1400.00 OP 300.00 UP

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* (A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Brother Kogyo Kabushiki Kaisha

Nagoya, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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 Publication Fee (No small entity discount permitted)
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Date February 23, 2007

Typed or printed name Gang Luo

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